Compensation of Hospital Employees



DOH 422-092/CHS 257 (REV` 08/01/2012)

Calendar Year: Entity Name:	2013 Virginia Mason	Medical Center				5611 122	,	
(A)Employee Name (who does not have direct patient care responsibilities)	Indicate if Lead Administrator	Hospital if applicable	(i) Base Compensation	of W-2 and/or 1099 N (ii) Bonus & Incentive Compensation	(iii) Other Reportable Compensation	(C) Retirement and Deferred Compensation	(D)Non- Taxable Benefits	(E) Total
¹ Gary Kaplan	Yes	Virginia Mason	938,733	412,881	17,688	564,954	27,007	1,961,263
² Suzanne Anderson	No	Virginia Mason	484,176	163,774	25,684	59,275	21,164	754,073
³ Sarah Patterson	No	Virginia Mason	467,647	168,573	20,960	46,920	26,737	730,838
4 Charleen Tachibana	No	Virginia Mason	372,886	101,970	29,620	54,441	20,542	579,459
5 Lynne Chafetz	No	Virginia Mason	371,310	98,068	18,880	57,978	17,960	564,196
6 William Poppy	No	Virginia Mason	344,860	97,037	39,906	16,431	29,543	527,778
7								0
8								0
9								0
10								0
11								0
12								0
13								0
14								0
15								0

Add Additional lines as needed

Notes:

Please refer to IRS Form 990 and Schedule J for definitions of types of compensation

Form 990 Schedule J http://www.irs.gov/pub/irs-pdf/i990sj.pdf

If the five highest paid employees do not include the lead administrator, please report compensation information for the lead administrator on line 1, and for the five highest paid employees without patient care responsibilities on lines 2 through 6.

Please submit compensation information to DOH either by mail, fax or email to the following address:

Washington State Department of Health

Center for Health Statistics/Hospital and Patient Data Section

MS: 47814

Olympia, WA 98504-7814

Fax: (360) 753-4135

email: hos@doh.wa.gov